

## DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



March 10, 1992

ALL-COUNTY LETTER NO. 92-31

TO: ALL-COUNTY WELFARE DIRECTORS

SUBJECT: IN-HOME SUPPORTIVE SERVICES CASE MANAGEMENT INFORMATION  
AND PAYROLLING SYSTEM (CMIPS) COUNTY SUMMARY (CSUM)  
SCREEN, THE COUNTY SUMMARY INPUT DOCUMENT (SOC 374) AND  
THE MANAGEMENT STATISTICS SUMMARY (MSS) REPORT

The purpose of this letter is to provide Counties with an explanation of the changes to the CSUM screen, the CSUM input document (SOC 374) and the MSS report which will all be effective March 1, 1992.

The CSUM and the MSS were revised to improve the reporting and monitoring of fiscal and program information for the In-Home Supportive Services (IHSS) Program. Information from both monthly and quarterly reporting is used to produce the MSS report which is utilized by various levels of State and County staff to determine the fiscal status of the IHSS Program. Monthly reporting on the CSUM screen must be entered by the County no later than the tenth of the month following the report month. Quarterly reporting of County Administrative Expense Claim (CAEC) data must be entered no later than the tenth of the second month following the end of the State fiscal year quarter. These deadlines have not changed, but are included here as a reminder. Failure to report timely or entering faulty data diminishes the utility of this valuable report.

In the event monthly data is not entered by the tenth of the month, County may still enter data for any month in the quarter until the tenth of the second month following the end of the State fiscal year quarter. For example, data for the months of July, August and September can be entered or adjusted any time until November 10. However, every effort must be made to enter the data timely because late monthly data entry results in incomplete and inaccurate information for County and State reports. If it should happen that data cannot be entered by the quarterly deadline, Counties will be locked out of the CSUM screen and must submit the information to the SDSS Adult Services Branch on form SOC 374 as soon as possible for entry by State staff.

A. The following is a summary of the modifications to the CSUM Screen:

1. The monthly reporting section has been moved to the top of the screen. This is a County entry section. The changes to this section are:
  - a. The heading COUNTY CC/HM HOURS has been changed to MONTHLY REPORTING.
  - b. The field for Refugee reporting has been removed as it is no longer in use.
  - c. The field for Estimated Monthly Cost (All Modes) reporting has been removed as it has never been used.
2. The quarterly reporting section has been moved to just below the Monthly Reporting section. This is a County entry section. The changes to this section are:
  - a. The heading HOMEMAKER/SUPERVISOR has been changed to WELFARE STAFF to incorporate the Homemaker (direct services) and Supported IP information under one heading.
  - b. The CASEWORK, OVERHEAD, SUBTOTAL and TIMESTUDY HOURS sections have been changed to HM COST (Homemaker Direct Services Cost), HM T/S HOURS (Homemaker Timestudy Hours), SUP IP COST (Supported IP Cost) and SUP IP T/S HOURS (Supported IP Timestudy Hours). These were changed to correlate to the County Administrative Expense Claim (CAEC) reporting of Homemaker (direct services) and Supported IP (support activities) costs and timestudy hours.
3. The IHSS COUNTY SUMMARY has been renamed ALLOCATION AND YEAR-TO-DATE COST. This is a display only section which will provide cumulative year-to-date expenditures for each mode of service as well as the balance of the allocation still available. The changes to this section are:
  - a. The INITIAL and SUPPLEMENTAL ALLOCATION fields have been removed as they are no longer in use.
  - b. HOMEMAKER EXPENSE has been changed to WF STF CST (Welfare Staff Cost) to incorporate the Homemaker (direct services) and the Supported IP costs.

- c. WK CMP CST (Workers Comp Cost) and CMIPS COST (Case Management, Information and Payrolling System Cost) have been added to reflect the additional costs due to realignment. These costs will be deducted from the total allocation at the beginning of the Fiscal Year.
  - d. FUNDS ADVANCED field has been removed as it has never been used.
- 4. COUNTY PLAN fields have been added to the bottom of the screen to identify projected expenditures in the various modes. This is a display only section.
- B. The County Summary (CSUM) Input document SOC 374 was modified to correlate to the changes in the CSUM Screen. The following is a summary of the modifications:
  - 1. Monthly and quarterly reporting instructions have been added.
  - 2. Box B2 MODE has been moved from line B and is now box A2 MODE.
  - 3. There is now only one monthly reporting section. Box B3 DATE has been removed and lines G through K have been reassigned. Lines C through E remain unchanged.
  - 4. Line F Refugee has been removed because it is no longer used.
  - 5. Line L Estimated Monthly Cost (All Modes) has been removed because it has never been used.
  - 6. The quarterly reporting lines have been changed from M through Q to F through J due to the removal of the second monthly reporting section. The changes to this section are:
    - a. The heading HOMEMAKER/SUPERVISOR has been changed to WELFARE STAFF to incorporate the Homemaker and Supported IP information under one heading.
    - b. N2-CASEWORK, O1-OVERHEAD, P1-SUBTOTAL and Q1-TIMESTUDY HOURS boxes have been changed to G2-HM COST, H1-HM T/S HOURS, I1-SUP IP COST and J1-SUP IP T/S HOURS. These were changed to correlate to the CAEC DFA 47 Social Services Time Study Summary reporting of IHSS Provider (Homemaker direct services) and IHSS Supervision (Supported IP activities) costs and timestudy hours.

C. The Management Statistics Summary (MSS) report was modified to correlate to the changes in the CSUM screen and the SOC 374 form. The following is a summary of the modifications:

1. The Refugee and Other Cost lines were removed from the Authorized and Paid sections as on the CSUM screen and SOC 374.
2. The Allocation Summary heading was changed to the Allocation/Cost Summary (Year-to-Date) and was revised to correlate to the revised CSUM screen and the SOC 374.
3. Changed Checks Issued - Individual Provider Mode to Warrants Issued - Individual Provider Mode. Also changed each heading from checks to warrants.
4. The Quarterly Cost Summary section was expanded to show all four quarters of the Fiscal Year data and the date information was entered in CSUM by the County or by CMIPS when information is produced by the Contractor Interface (COIN) screen.

Attached are copies of the old CSUM screen, old SOC 374, new CSUM screen and SOC 374 samples, and the field-by-field description and instructions for completing the CSUM input document SOC 374. Also attached are copies of the old MSS report and the new MSS report with its field-by-field description. Revised CMIPS User's Manual sections will be sent to each County for inclusion in their CMIPS User's Manuals. The enclosed copy of the draft SOC 374 can be photocopied for use until a supply of this form can be printed and made available at the SDSS warehouse.

Questions regarding data entry or the reports should be directed to the IHSS/Fiscal Unit at (916) 657-2152.



LOREN B. SUTER  
Deputy Director  
Adult and Family Services

Attachments

cc: CWDA

OLD SCREEN

THIS CSUM I 99HM

NEXT CSUM I 99IP

IN-HOME SUPPORTIVE SERVICES COUNTY SUMMARY			STATEWIDE SUMMARY	
730,691,001	INITIAL ALLOCATION	165,626	OTHER EXPENSES	
0	SUPPL. ALLOCATION	442,090,855	TOTAL PROGRAM EXPENSE	
730,691,001	TOTAL ALLOCATION	288,600,145	BALANCE REMAINING	
26,132,931	CONTRACT EXPENSE			
5,254,246	HOMEMAKER EXPENSE	0	FUNDS ADVANCED	
410,538,051	IP EXPENSE	34,302,027	TOTAL EMP TAXES	

FOR MONTH: 09 / 91		COUNTY CC/HM HOURS	MODE: HM	DATE: 00/00/00	
	TOTAL CASES	TOTAL HOURS	EXPENDITURES	SOC CASES	SOC AMOUNT
SI	2	5	1,898		
NSI	610	7,668	579,015		
TOTAL	612	7,673	580,913	16	608
REFUGEE	0	0	0		
ESTIMATED MONTHLY COSTS: STAFF DEV.			0 EDP	0 OTHER	0

QUARTER: 1 FY: 91 92		QUARTERLY REPORTING		DATE: 00/00/00	
CONTRACT COSTS	HOMEMAKER SUPERVISOR	OTHER COSTS		GRAND TOTAL	
690,846	CASEWORK 0	STAFF DEV.	0	3,189,100	
	OVERHEAD 0	EDP	0		
	SUBTOTAL 2,498,368	OTHER	0		
	TIME/STUDY HRS 0	SUBTOTAL	0		

NEW SCREEN

THIS CSUM I 99IP

NEXT CSUM I 99CC

FOR MONTH: 09 / 91

MONTHLY REPORTING

MODE: IP

DATE: 00/00/00

	TOTAL CASES	TOTAL HOURS	EXPENDITURES	SOC CASES	SOC AMOUNT
SI	32,034	5,208,867	23,628,880		
NSI	111,670	6,108,074	27,985,645		
TOTAL	143,704	11,316,941	51,614,525	9,139	993,635

QUARTER: 1 FY: 91 / 92

QUARTERLY REPORTING

DATE: 00/00/00

CONTRACT COST	WELFARE STAFF	OTHER COST	GRAND TOTAL
10,690,846	HM COST	2,498,308	STAFF DEV 0
	HM T/S HRS	0	EDP 0
	SUP IP CST	0	OTHER 0
	SUP IP T/S HRS	0	SUBTOTAL 0

ALLOCATION AND YEAR-TO-DATE COST:

REV# 00 DATE: 00/00/00

TOT ALLOC	730,691,001	TOT EMP TX	34,302,027	OTHER COST	165,626
CC COST	26,132,931	WK CMP CST	0	TOT YTD CST	442,090,855
WF STF CST	5,254,246	CMIPS COST	0	BALANCE	
IP COST	410,538,051			REMAINING	288,600,145

COUNTY PLAN:

REV# 00 DATE: 00/00/00

TOT CASELOAD-PD CS:	0	PD HR:	0	ATH CS:	0
IP MODE- PD CS:	0	HR/CS:	.0	CST/HR:	.00
CC MODE- PD CS:	0	HR/CS:	.0	CST/HR:	.00
HM SERVICES- PD CS:	0	HR/CS:	.0	CST/HR:	.00
SUP IP SERV- T/S HRS:	0	CST/HR:	.00	OTHER COST:	0

**IN-HOME SUPPORTIVE SERVICES  
CASE MANAGEMENT INFORMATION AND  
PAYROLLING SYSTEM (IHSS/CMIPS)  
COUNTY SUMMARY (CSUM)  
INPUT DOCUMENT**

OLD FORM

1	A COUNTY CODE
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**MONTHLY REPORTING**

1	MONTH	YEAR	2	MODE	3	MONTH	DAY	YEAR
B	FOR MONTH				DATE			
		TOTAL CASES		TOTAL HOURS	EXPENDITURES		SOC CASES	SOC AMOUNT
C	SI	2	3	4	\$			
D	NSI	2	3	4	\$			
E	TOTAL	2	3	4	\$	5		6 \$
F	REFUGEE	2	3	4	\$			

1	MONTH	YEAR	2	MODE	3	MONTH	DAY	YEAR
G	FOR MONTH				DATE			
		TOTAL CASES		TOTAL HOURS	EXPENDITURES		SOC CASES	SOC AMOUNT
H	SI	2	3	4	\$			
I	NSI	2	3	4	\$			
J	TOTAL	2	3	4	\$	5		6 \$
K	REFUGEE	2	3	4	\$			

1	ESTIMATED MONTHLY COST (ALL MODES)	2	STAFF DEVELOPMENT \$	3	EDP \$	4	OTHER \$
L							

**QUARTERLY REPORTING**

1	QUARTER	2	FY	3	MONTH	DAY	YEAR
M				DATE			
	CONTRACT	HOMEMAKER/SUPERVISOR	OTHER COSTS	GRAND TOTAL			
N	1 CONTRACT COSTS \$	2 CASEWORK \$	3 STAFF DEVELOPMENT \$	4 (N1 + P1 + Q2) \$			
O		1 OVERHEAD \$	2 EDP \$				
P		1 SUBTOTAL \$	2 OTHER \$				
Q		1 TIME STUDY HOURS	2 SUBTOTAL \$				

1	PREPARED BY	2	DATE PREPARED	3	REMARKS
R					
1	ENTERED BY	2	DATE ENTERED	3	REMARKS
S					

# IN-HOME SUPPORTIVE SERVICES CASE MANAGEMENT, INFORMATION AND PAYROLLING SYSTEM (IHSS/CMIPS) COUNTY SUMMARY (CSUM) INPUT DOCUMENT

MONTHLY REPORTING INSTRUCTIONS:

NEW FORM

All information must be entered in CSUM by the 10th of the month following the report month. Late or erroneous information results in incomplete management information for the County and State reports.

## Individual Provider (IP) Mode:

- o Information entered shall reflect only the Shares-of-Cost collected by the County during the month of the report. All other information is generated by the CMIPS.

## County Contract (CC) Mode:

- o Information to be reported shall reflect only the payments made to the contractor(s) during the month of the report and the cases and hours related to those payments, regardless of when the services were performed.
- o Counties utilizing the CMIPS Contractor Interface (COIN) need not enter information into the CSUM, except shares of cost collected by the County.

## Homemaker (HM) Mode:

- o Information to be reported must show the cases and IHSS hours served by County staff during the report month. The hours must reflect actual IHSS direct service hours (NOT staff time study hours).
- o To determine the expenditures to be entered for HM service, multiply the IHSS hours served times the cost per hour shown in the current fiscal year's County Plan for Welfare Staff (Direct Services). The product is the HM expenditure.
- o Supported IP information is ONLY reported quarterly.

QUARTERLY REPORTING INSTRUCTIONS:

All information must be entered into CSUM by the 10th of the second month following the end of the State Fiscal Year quarter (November 10; February 10; May 10; and August 10). Late or erroneous information results in incomplete management information for County and State reports.

- o All information may be obtained from the County Administrative Expense Claim.
- o Counties using the CMIPS Contractor Interface (COIN) need not enter information in Field G1 if no other payments were made to the contractor(s) and no additional claims are made for reimbursement for the IHSS contract(s).

A	1 COUNTY CODE	2 MODE
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## MONTHLY REPORTING

B	1 FOR MONTH/YEAR	MONTH	YEAR
		TOTAL CASES	TOTAL HOURS
		EXPENDITURES	SOC CASES
			SOC AMOUNT
C	1 SI	2	3
D	1 NSI	2	3
E	1 TOTAL	2	3

## QUARTERLY REPORTING

F	1 QUARTER	2 FY
	CONTRACT	WELFARE STAFF
	OTHER COST	GRAND TOTAL
G	1 CONTRACT COST	2 HM COST
	\$	\$
H	1 HM T/S HRS	2 EDP
I	1 SUP IP COST	2 OTHER
J	1 SUP IP T/S HRS	2 SUBTOTAL

K	1 PREPARED BY	2 DATE PREPARED	3 REMARKS
L	1 ENTERED BY	2 DATE ENTERED	3 REMARKS



JOB - HHJ540F IN - HOME SUPPORTIVE SERVICES PAGE - 117  
COUNTY - (59) ALL COUNTIES MANAGEMENT STATISTICS SUMMARY REPORT MONTH - NOVEMBER  
RUN DATE - 12/10/91

A U T H O R I Z E D										P A I D			
	TOTAL CASES	TOTAL HOURS	TOTAL AMOUNT	RESTAURANT MEAL ALLOW	SOC AMOUNT	TOTAL CASES	TOTAL HOURS	TOTAL AMOUNT	RESTAURANT MEAL ALLOW	SOC CASES	SOC AMOUNT		
CONTRACT													
SI	552	46,915	467,598			455	35,493	347,552					
NSI	13,757	385,145	3,923,840			11,913	294,086	2,950,996					
TOTAL	14,309	432,060	4,391,438			12,368	329,579	3,298,548		911	55,676		
AVERAGE		30	306				26	266					
REFUGEE	57	1,555	16,173			0	0	0					
CNTY HMAKR													
SI	7	97	1,104			1	3	1,568					
NSI	786	9,367	149,438			872	8,873	381,546					
TOTAL	793	9,464	150,543			873	8,876	383,114		13	375		
AVERAGE		11	189				10	438					
REFUGEE	4	37	826			0	0	0					
INDIV PROV													
SI	33,917	5,606,466	23,917,144	6,758		30,390	5,144,308	23,251,683	6,386				
NSI	125,232	6,917,241	29,479,849	100,998		105,306	6,067,825	27,784,197	97,274				
TOTAL	159,149	12,523,707	53,396,993	107,756		135,696	11,212,133	51,035,881	103,660	9,016	976,526		
AVERAGE		78	335				82	376					
REFUGEE	3,651	237,629	1,013,745	496		3,166	223,895	1,033,068	496				
TOTALS													
SI	34,306	5,653,478	24,385,846	6,758		30,846	5,179,804	23,600,803	6,386				
NSI	139,135	7,511,753	33,553,128	100,998		118,091	6,370,784	31,116,740	97,274				
TOTAL	173,441	12,965,232	57,938,975	107,756		148,937	11,550,588	54,717,544	103,660	9,940	1,032,577		
AVERAGE		74	334				77	367					
REFUGEE	3,704	239,221	1,030,745	496		3,166	223,895	1,033,068	496				
OTHER COST													
GRAND TOTAL	173,441	12,965,232	57,938,975	107,756	12,492	1,259,398	148,937	11,550,588	54,717,544	103,660	9,940	1,032,577	

ALLOCATION SUMMARY

INITIAL ALLOCATION	SUPPLEMENTAL ALLOCATION	TOTAL ALLOCATION	FUNDS ADVANCED
\$730,691,001.00	\$0.00	\$730,691,001.00	\$0.00

CONTRACT EXPENSE	COUNTY HOMEMAHER EXPENSE	IP EXPENSE	OTHER EXPENSE	TOTAL PROGRAM EXPENSE	BALANCE REMAINING
\$17,741,206.45	\$3,395,886.22	\$262,277,802.37	\$110,908.00	\$283,525,803.04	\$447,165,197.96

CASELOAD SUMMARY

LAST MONTH	APPROVALS	PENDING	TOTAL	LEAVE	TERMINATED	DENIED	NEXT MONTH
170,126	4,140	4,441	174,266	687	3,228	1,187	171,038

CHECKS ISSUED - INDIVIDUAL PROVIDER

ADVANCE CHECKS NUMBER	AMOUNT	EMERGENCY CHECKS NUMBER	AMOUNT	REGULAR PAYROLL NUMBER	AMOUNT	RESTAURANT MEAL NUMBER	AMOUNT	TOTAL ALL CHECKS NUMBER	AMOUNT	# OF PAID PROVIDERS
1,331	\$1,296,950.64	2,788	\$463,323.29	279,671	\$45,964,820.75	3,343	\$103,660.50	291,009	\$46,786,745.51	150,435

WAGE AND BENEFIT REPORT - INDIVIDUAL PROVIDER ONLY

NUMBER CASES	GROSS WAGES	FICA	SUI	FUTA	TOTAL EMPLR PAYROLL TAX	RESTAURANT MEAL ALLOW	SHARE OF COST	TOTAL EXPENSE	AVERAGE \$ / CASE
SI	30,390	\$21,913,763.72	\$440,049.61	\$351,548.49	\$92,544.14	\$6,386.00	\$552,608.12	\$23,251,683.84	\$765.11
NSI	105,306	\$25,849,317.83	\$852,994.37	\$324,284.73	\$84,054.28	\$97,274.50	\$423,727.92	\$27,784,197.79	\$263.84
TOTAL	135,696	\$47,763,081.55	\$293,043.98	\$675,833.22	\$176,598.42	\$103,660.50	\$976,336.04	\$51,035,881.63	\$376.10
REFUGEE	3,166	\$955,020.83	\$67,442.31	\$11,800.32	\$3,209.90	\$496.00	\$4,901.00	\$1,033,068.36	\$326.30

QUARTERLY EXPENSE SUMMARY

CONTRACT COSTS		HOMEMAKER COSTS			OTHER COSTS			TOTAL COSTS	
TOTAL TIME STUDY HRS.	0	CASEWORK COSTS	OVERHEAD COSTS	SUBTOTAL	STAFF DEVELOPMENT	EDP	OTHER COSTS	SUBTOTAL	
\$0	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

## NEW REPORTS

A U T H O R I Z E D						P A I D					
TOTAL CASES	TOTAL HOURS	TOTAL AMOUNT	RESTAURANT HEAL ALLOW	SOC AMOUNT	TOTAL CASES	TOTAL HOURS	TOTAL AMOUNT	RESTAURANT MEAL ALLOW	SOC CASES	TOTAL AMOUNT	
CONTRACT											
SI	9	897	8,721		9	778	7,462				
NSI	376	10,549	102,540		368	8,975	85,408				
TOTAL	385	11,446	111,262	38	377	9,753	92,871		33	2,218	
AVERAGE		29	288			25	246				
CITY HNAKR											
SI	0	0	0		0	0	0				
NSI	0	0	0		0	0	0		0	0	
TOTAL	0	0	0	0	0	0	0		0	0	
AVERAGE		0	0			0	0				
INDIV PROV											
SI	62	13,502	57,384	0	63	13,238	59,399	0			
NSI	138	8,026	34,112	0	130	7,487	34,136	0			
TOTAL	200	21,528	91,496	18	193	20,726	93,535	0	17	2,122	
AVERAGE		107	457			107	484				
TOTALS											
SI	71	14,399	66,105	0	72	14,016	66,861	0			
NSI	514	18,576	136,653	0	498	16,462	119,545	0			
TOTAL	585	32,975	202,759	56	570	30,479	186,407	0	50	4,340	
AVERAGE		56	346			53	327				
GRAND TOTL											
585	32,975	202,759	0	56	4,251	570	30,479	186,407	0	50	
										4,340	

ALLOCATION/COST SUMMARY (YEAR-TO-DATE)					
	TOTAL ALLOCATION	CONTRACT COST	WELFARE STAFF COST	IP COST	
WORKERS COMP COST	\$197,003				
CHIPS COST	\$97,591				
OTHER COST	\$513				
		\$563,638	\$154,722	\$135,455	
					TOTAL YEAR-TO-DATE COST
					\$1,148,922
					BALANCE REMAINING
					\$1,700,708

CASELOAD SUMMARY							
LAST MONTH	APPROVALS	PENDING	TOTAL	LEAVE	TERMINATED	DENIED	NEXT MONTH
570	19	0	589	5	22	3	567

NEW REPORT

WARRANTS ISSUED - INDIVIDUAL PROVIDER MODE										
ADVANCE WARRANTS		EMERGENCY WARRANTS		REGULAR PAYROLL		RESTAURANT MEAL		TOTAL ALL WARRANTS		# OF PAID PROVIDERS
NUMBER	AMOUNT	NUMBER	AMOUNT	NUMBER	AMOUNT	NUMBER	AMOUNT	NUMBER	AMOUNT	
4	\$4,159.09	1		5.95	387	\$83,740.10	0	0.00	402	\$85,962.11
										202

WAGE AND BENEFIT REPORT - INDIVIDUAL PROVIDER ONLY									
NUMBER CASES	GROSS WAGES	FICA	SUI	FUTA	TOTAL EMPLR PAYROLL TAX	RESTAURANT MEAL ALLOW	SHARE OF COST	TOTAL COST	AVERAGE \$ / CASE
SI	63	\$56,263.93	\$3,289.14	\$1,158.74	\$310.81	\$4,758.69	\$0.00	\$59,399.46	\$942.85
INSI	130	\$31,820.95	\$2,150.47	\$537.48	\$127.18	\$2,815.13	\$0.00	\$34,136.47	\$262.59
TOTAL	193	\$88,084.88	\$5,439.61	\$1,696.22	\$437.99	\$7,573.82	\$0.00	\$93,535.93	\$484.64

QUARTERLY COST SUMMARY										
QTR	CONTRACT	TIME STUDY HOURS	HOMEMAKER COST	SUPPORTED IP TIME STUDY HOURS	COST	STAFF DEVELOP	OTHER COST EDP	OTHER	TOTAL	DATE ENTERED IN CHIPS
(1)	\$278,025	0	\$0	\$1,826	\$75,900	\$260	\$0	\$0	\$354,185	11/03/91
(2)	\$285,613	0	\$0	\$1,896	\$78,822	\$253	\$0	\$0	\$364,688	02/04/92
(3)	\$0	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
(4)	\$0	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	

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\* IHSS MANAGEMENT STATISTICS SUMMARY \*  
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This monthly report is a summary of County data reflecting services to recipients by service delivery mode. It presents information on authorized and paid expenditures. It contains a summary of the IHSS allocation to Counties, authorized caseload movement, information on warrants issued to individual providers, the individual provider wage and benefit report, and the quarterly County Administrative Expense Claim (CAEC).

\*\*\*\*\*FIELD-BY-FIELD DESCRIPTION\*\*\*\*\*

GENERAL

CONTRACT: Services purchased from an agency contracted by the County.

HOMEMAKER: Services provided by County employees.

INDIV PROV: Services purchased from individual providers.

SI: Abbreviation for recipients identified as severely impaired.

NSI: Abbreviation for recipients identified as non-severely impaired.

TOTAL: Total of all SI and NSI cases and amounts. This is an unduplicated count of cases and amounts.

AVERAGE: Computer generated average of total hours and total dollars per-case during the report month.

\*USER NOTE\* Number of cases in each mode in the AUTHORIZED and PAID sections below reflect cases that had hours authorized or were paid for hours during the report month. Because recipients in multi-mode counties may utilize more than one mode of service during any month (mixed mode), the TOTAL CASES fields may not be the sum of the modes, i.e., the TOTAL is an unduplicated count of cases.

AUTHORIZED

AUTHORIZED: Cases, service hours and costs authorized by Social Service Workers on the SOC 293 to be purchased during the report month.

TOTAL CASES: Total number of cases that have service hours authorized to be purchased during the report month. A case is counted by each mode of service authorized. Includes restaurant meal allowance only cases.

TOTAL HOURS: Total number of service hours authorized to be purchased during the report month.

**TOTAL AMOUNT:** Total amount of money for the service hours authorized to be purchased during the report month, excluding restaurant meal allowances and less shares of cost.

**RESTAURANT MEAL ALLOWANCE:** Total amount of money authorized to be paid to recipients for restaurant meal allowances during the report month.

**SOC CASES:** Total number of recipients that have shares of cost during the report month. Share-of-cost cases are reported by the major mode of service delivery when there is more than one.

**SOC AMOUNT:** Total amount of money to be paid by the recipients for shares-of-cost during the report month. Share of cost amounts are reported by the major mode of service delivery when there is more than one.

PAID

**TOTAL CASES:** Total number of unique case-months of service, not previously reported, for which service hours were paid during the report month. Cases are counted by each mode of service for which services were purchased.

**TOTAL HOURS:** Total number of service hours paid during the report month. Hours are counted by each mode of service for which hours were purchased.

**TOTAL AMOUNT:** Total amount of money paid during the report month for services, excluding restaurant meal allowances, and less shares-of-cost. For the IP mode, this reflects the total wages plus employer taxes, less shares of cost, paid to individual providers during the report month. This is equal to Total Cost from the Wage and Benefit Report on page two of the report. For the CC mode, it reflects the dollar amount paid to contractors during the report month. For the HM mode, it reflects the homemaker (direct services only) cost during the report month.

**RESTAURANT MEAL ALLOWANCE:** Total amount of money paid to recipients for restaurant meal allowances during the report month.

**SOC CASES:** Total number of recipients who paid shares-of-cost during the report month. Share of cost cases are reported by the major mode of service delivery when there is more than one.

**SOC AMOUNT:** Total amount of money paid by recipients for shares-of-cost during the report month. Share of cost amounts are reported by the major mode of service delivery when there is more than one.

## ALLOCATION AND COST SUMMARY (Year-To-Date)

## TOTAL

ALLOCATION: Total of the initial allocation, Workers' Compensation, CMIPS contracts and all supplementary adjustments made during the fiscal year.

## CONTRACT

COST: Total money paid fiscal year-to-date by a County for contract services.

## WELFARE STAFF

COST: Total money paid fiscal year-to-date by a County for Welfare Staff - Homemaker (HM) services and Supported IP (SIP) activities. This is the total amount claimed as a Welfare Staff cost during the fiscal year-to-date on the quarterly CAEC.

IP COST: Total money paid fiscal year-to-date by a County for the purchase of services, including wages and employer taxes.

## WORKERS' COMP

COST: Total fiscal year-to-date prorata share of workers' compensation cost.

## CMIPS

COST: Total fiscal year-to-date prorata share of CMIPS contracts cost.

## OTHER

COST: Other cost claimed on the CAEC for E.D.P., Staff Development, and Other Cost.

## TOTAL

## YEAR-TO-DATE

COST : Total IP wages and employer taxes, Contract, Welfare Staff, Workers' Compensation, CMIPS contracts and Other costs for the fiscal year-to-date.

## BALANCE

REMAINING: The difference between the total allocation to date and the total cost to date.

## CASELOAD SUMMARY

LAST MONTH: Total of all cases in status I (Interim eligibility), E (Eligible), or L (Leave) at the end of the prior month.

APPROVALS: Cases which were new applicants for service during the month and were approved.

PENDING: Cases in status R (Record) which are awaiting determination of eligibility.

TOTAL: Total of all cases in status I, E or L at any time during the month.

LEAVE: Total number of cases in status L at the end of the month.

TERMINATED: Total number of cases which were in status I, E or L during the month and placed in status T during the month.

DENIED: Total number of applications which were denied eligibility for any reason during the month.

NEXT MONTH: Total number of cases in status I, E or L at the end of the month.

## WARRANTS ISSUED - INDIVIDUAL PROVIDER MODE

ADVANCE  
WARRANTS: Number and gross amount of advance payment warrants issued during the month.

EMERGENCY  
WARRANTS: Number and gross amount of emergency warrants issued during the month.

REGULAR  
PAYROLL: Number and gross amount of regular payroll warrants issued during the month.

RESTAURANT  
MEAL: Number and gross amount of restaurant meal allowance warrants issued during the month.

TOTAL ALL  
WARRANTS: Total number and gross amount of warrants for all reasons (including restaurant meals) issued during the month.

\*\*NOTE\*\* Total All Warrants is equal to the Gross Wages less the Shares of Cost on the Wage and Benefit Report section. The sum of Advance, Emergency, Regular Payroll and Restaurant Meal warrants may not equal the Total All Warrants amount. Other warrants written but not reflected as a warrant count in this report are liens, adjustments, and replacements.

# OF PAID  
PROVIDERS: Total number of providers paid from advance pay, emergency pay and regular pay. This is an unduplicated count of providers.

## WAGE &amp; BENEFIT REPORT - INDIVIDUAL PROVIDER ONLY

NUMBER OF  
CASES: Total number of unique case-months of service not previously reported during the report month, in the IP mode, for which wages and/or restaurant meal allowances were paid.



**GROSS WAGES:** Total wages paid during the month in the IP mode, including the shares of cost paid by the recipients but excluding restaurant meal allowances.

**FICA:** Total employer contributions for Social Security taxes.

**SUI:** Total employer contributions for State Unemployment Insurance taxes.

**FUTA:** Total employer contributions for Federal Unemployment Training Act taxes.

**TOTAL EMPLR**

**PAYROLL TAX:** Sum of FICA, SUI and FUTA employer contributions.

**RESTAURANT**

**MEAL**

**ALLOWANCE:** Total restaurant meal allowances paid during the report month.

**SHARE OF**

**COST:** Total shares of cost paid by recipients.

**TOTAL**

**COST:** Sum of the gross wages, employer payroll taxes, and restaurant meal allowances, less shares of cost, paid during the report month.

**AVERAGE**

**\$ / CASE:** Total cost divided by the number of paid case-months.

### QUARTERLY COST SUMMARY

**\*\*NOTE\*\***

This section is updated by the County on the CSUM (County Summary) screen from information obtained from the CAEC. It must be reported no later than the tenth day of the second month following the end of each fiscal year quarter.

**QTR:**

Quarter for which costs are being reported. State FY quarters are July-September=1; October-December=2; January-March=3; April-June=4.

**CONTRACT:**

Quarterly contract cost paid during the fiscal year by the County and claimed on the CAEC.

**WELFARE STAFF - HOMEMAKER AND SUPPORTED IP**

**HOMEMAKER**

**T/S HOURS:** Quarterly time-study hours devoted to homemaker services.

**HOMEMAKER**

**COST:** Quarterly costs devoted to homemaker services

## SUPPORTED IP

T/S HOURS: Quarterly time-study hours devoted to supported IP activities.

## SUPPORTED IP

COST: Quarterly costs devoted to supported IP activities.

OTHER COST

## STAFF

DEVELOPMENT: Quarterly cost attributed to the IHSS program taken from the CAEC.

EDP: Quarterly cost attributed to the IHSS Program, taken from the CAEC.

OTHER Sum of any other cost claimed or collected and reported during the quarter on the CAEC.

TOTAL: Sum of contract, welfare staff - homemaker and supported IP, and other costs claimed during the quarter.

## DATE ENTERED

IN CMIPS: System generated date on which the quarterly Contract, Welfare Staff and Other Cost information was entered in the CMIPS or updated by the COIN Screen.

\*\*\*\*\*  
\* GENERAL DESCRIPTION \*  
\*\*\*\*\*

DISTRIB.: By County.

FREQUENCY: Once a month.

WHEN: The Management Statistics Summary is generated on the 10th of each month.

SORT OPTION: By County with a Statewide Summary.

USAGE: This report is a summary of County data on services to recipients, by service delivery mode. It presents information on authorized and paid expenditures, a summary of the allocation to Counties, authorized caseload movement, information on warrants issued to individual providers, the individual provider wage and benefit report, and a quarterly CAEC summary.

BASIC  
FORMAT:

The first section of page 1 consists of CONTRACT - SI, NSI, Total, Average, HOMEMAKER - SI, NSI, Total, Average, INDIV PROV - SI, NSI, Total, Average, TOTALS - SI, NSI, Total, Average, and GRAND TOTAL. This column is followed by the authorized and paid sections which each include: total cases, total hours, total amount, restaurant meal allowance, SOC cases, and SOC amount.

The second section of page 1 is the ALLOCATION SUMMARY (Year-To-Date) which includes: total allocation, contract cost, welfare staff (HM and SIP) cost, IP cost, Worker's Compensation cost, CMIPS cost, other cost, total year-to-date cost and balance remaining.

The third section of page 1 is the CASELOAD SUMMARY which includes: last month, approvals, pending, total, leave, terminated, denied and next month.

The first section of page 2 is the WARRANTS ISSUED-INDIVIDUAL PROVIDER section which includes: advance warrants (number and amount), emergency warrants (number and amount), regular payroll (number and amount), restaurant meal (number and amount), total all warrants (number and amount), and # of paid providers.

The second section of page 2 is the WAGE AND BENEFIT REPORT -INDIVIDUAL PROVIDER ONLY. SI, NSI and total appear in the first column followed by number cases, gross wages, FICA, SUI, FUTA, total employer payroll tax, restaurant meal allowance, share of cost, total cost and average \$ / case.

The third section of page 2 is the QUARTERLY COST SUMMARY which consists of the quarter reported, contract, welfare staff-homemaker (HM) services and supported IP (SIP) activities which include: T/S hours and cost, other cost which includes: staff development, EDP, other, total and date entered in CMIPS. This section is repeated for each quarter of the fiscal year.

JOB - HIRJ540F  
COUNTY - (59) ALL COUNTIES

IN - HOME SUPPORTIVE SERVICES  
MANAGEMENT STATISTICS SUMMARY

PAGE - 001  
REPORT MONTH - DECEMBER  
RUN DATE - 01/10/92

A U T H O R I Z E D							P A I D					
	TOTAL CASES	TOTAL HOURS	TOTAL AMOUNT	RESTAURANT MEAL ALLOW	SOC CASES	SOC AMOUNT	TOTAL CASES	TOTAL HOURS	TOTAL AMOUNT	RESTAURANT MEAL ALLOW	SOC CASES	SOC AMOUNT
CONTRACT												
SI	9	897	8,721				9	778	7,462			
NSI	376	10,549	102,540				368	8,975	85,408			
TOTAL	385	11,446	111,262		38	2,301	377	9,753	92,871		33	2,218
AVERAGE		29	288					25	246			
CNTY HMAKR												
SI	0	0	0				0	0	0			
NSI	0	0	0				0	0	0			
TOTAL	0	0	0		0	0	0	0	0		0	0
AVERAGE		0	0					0	0			
INDIV PROV												
SI	62	13,502	57,384	0			63	13,238	59,399	0		
NSI	138	8,026	34,112	0			130	7,487	34,136	0		
TOTAL	200	21,528	91,496	0	18	1,949	193	20,726	93,535	0	17	2,122
AVERAGE		107	457					107	484			
TOTALS												
SI	71	14,399	66,105	0			72	14,016	66,861	0		
NSI	514	18,576	136,653	0			498	16,462	119,545	0		
TOTAL	585	32,975	202,759	0	56	4,251	570	30,479	186,407	0	50	4,340
AVERAGE		56	346					53	327			
GRAND TOTAL	585	32,975	202,759	0	56	4,251	570	30,479	186,407	0	50	4,340

ALLOCATION/COST SUMMARY (YEAR-TO-DATE)					
TOTAL ALLOCATION \$2,849,630		CONTRACT COST \$563,638	WELFARE STAFF COST \$154,722	IP COST \$135,455	
WORKERS COMP COST \$197,003	CHIPS COST \$97,591	OTHER COST \$513	TOTAL YEAR-TO-DATE COST \$1,148,922	BALANCE REMAINING \$1,700,708	

C A S E L O A D S U M M A R Y							
LAST MONTH	APPROVALS	PENDING	TOTAL	LEAVE	TERMINATED	DENIED	NEXT MONTH
570	19	0	589	5	22	3	567

JOB - H1HJ540F  
COUNTY - (59) ALL COUNTIES

IN-HOME SUPPORTIVE SERVICES  
MANAGEMENT STATISTICS SUMMARY

PAGE - 002  
REPORT MONTH - DECEMBER  
RUN DATE - 01/10/92

WARRANTS ISSUED - INDIVIDUAL PROVIDER MODE										
ADVANCE WARRANTS NUMBER	AMOUNT	EMERGENCY WARRANTS NUMBER	AMOUNT	REGULAR PAYROLL NUMBER	AMOUNT	RESTAURANT MEAL NUMBER	AMOUNT	TOTAL ALL WARRANTS NUMBER	AMOUNT	# OF PAID PROVIDERS
4	\$4,139.09	1	5.95	387	\$83,740.10	0	0.00	402	\$85,962.11	202

WAGE AND BENEFIT REPORT - INDIVIDUAL PROVIDER ONLY										
	NUMBER CASES	GROSS WAGES	FICA	SUI	FUTA	TOTAL EMPLR PAYROLL TAX	RESTAURANT MEAL ALLOW	SHARE OF COST	TOTAL COST	AVERAGE \$ / CASE
ISI	63	\$56,263.93	\$3,289.14	\$1,158.74	\$310.81	\$4,758.69	\$0.00	\$1,623.16	\$59,399.46	\$942.85
INSI	130	\$31,820.95	\$2,150.47	\$537.48	\$127.18	\$2,815.13	\$0.00	\$499.61	\$34,136.47	\$262.59
TOTAL	193	\$88,084.88	\$5,439.61	\$1,696.22	\$437.99	\$7,573.82	\$0.00	\$2,122.77	\$93,535.93	\$484.64

QUARTERLY COST SUMMARY										
QTR	CONTRACT	HOMEMAKER TIME STUDY HOURS	COST	SUPPORTED IP TIME STUDY HOURS	COST	STAFF DEVELOP	OTHER COST EDP	OTHER	TOTAL	DATE ENTERED IN CMIPS
(1)	\$278,025	0	\$0	\$1,826	\$75,900	\$260	\$0	\$0	\$354,185	11/03/91
(2)	\$285,613	0	\$0	\$1,896	\$78,822	\$253	\$0	\$0	\$364,688	02/04/92
(3)	\$0	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
(4)	\$0	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	

# IN-HOME SUPPORTIVE SERVICES CASE MANAGEMENT, INFORMATION AND PAYROLLING SYSTEM (IHSS/CMIPS) COUNTY SUMMARY (CSUM) INPUT DOCUMENT

## MONTHLY REPORTING INSTRUCTIONS:

All information must be entered in CSUM by the 10th of the month following the report month. Late or erroneous information results in incomplete management information for the County and State reports.

### Individual Provider (IP) Mode:

- Information entered shall reflect only the Shares-of-Cost collected by the County during the month of the report. All other information is generated by the CMIPS.

### County Contract (CC) Mode:

- Information to be reported shall reflect only the payments made to the contractor(s) during the month of the report and the cases and hours related to those payments, regardless of when the services were performed.
- Counties utilizing the CMIPS Contractor Interface (COIN) need not enter information into the CSUM, except shares of cost collected by the County.

### Homemaker (HM) Mode:

- Information to be reported must show the cases and IHSS hours served by County staff during the report month. The hours must reflect actual IHSS direct service hours (NOT staff timesheet hours).
- To determine the expenditures to be entered for HM service, multiply the IHSS hours served times the cost per hour shown in the current fiscal year's County Plan for Welfare Staff (Direct Services). The product is the HM expenditure.
- Supported IP information is ONLY reported quarterly.

## QUARTERLY REPORTING INSTRUCTIONS:

All information must be entered into CSUM by the 10th of the second month following the end of the State Fiscal Year quarter (November 10; February 10; May 10; and August 10). Late or erroneous information results in incomplete management information for County and State reports.

- All information may be obtained from the County Administrative Expense Claim.
- Counties using the CMIPS Contractor Interface (COIN) need not enter information in Field G1 if no other payments were made to the contractor(s) and no additional claims are made for reimbursement for the IHSS contract(s).

A	1 COUNTY CODE	2 MODE
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### MONTHLY REPORTING

B	1 FOR MONTH/YEAR	MONTH	YEAR
		TOTAL CASES	TOTAL HOURS
			EXPENDITURES
			SOC CASES
			SOC AMOUNT
C	1 SI	2	3
			4
			\$
D	1 NSI	2	3
			4
			\$
E	1 TOTAL	2	3
			4
			\$
			5
			6
			\$

### QUARTERLY REPORTING

F	1 QUARTER	2 FY
	CONTRACT	WELFARE STAFF
		OTHER COST
		GRAND TOTAL
G	1 CONTRACT COST	2 HM COST
	\$	\$
		3 STAFF DEVELOPMENT
		\$
		4 (G1, G2, I1 & J2)
		\$
H	1 HM T/S HRS	2 EDP
		\$
I	1 SUP IP COST	2 OTHER
	\$	\$
J	1 SUP IP T/S HRS	2 SUBTOTAL
		\$

K	1 PREPARED BY	2 DATE PREPARED	3 REMARKS
L	1 ENTERED BY	2 DATE ENTERED	3 REMARKS

\*\*\*\*\*  
\* IHSS/CMIPS COUNTY SUMMARY SCREEN (CSUM)/FORM SOC 374 \*  
\*\*\*\*\*

\*\*\*\*FIELD-BY-FIELD DESCRIPTION\*\*\*\*

COUNTY MONTHLY REPORTING FOR  
COUNTY CONTRACT AND WELFARE STAFF COSTS

1. THIS INFORMATION MUST BE ENTERED INTO THE CMIPS BY THE TENTH OF EACH MONTH. For each mode, use a separate form and enter the data on a separate screen.
2. Individual Provider (IP) information is system generated by CMIPS based on actual payroll information.
3. Counties must provide all other information from their records.
4. County Contract (CC) information must be entered by the County.
5. If a County is utilizing the Contractor Interface (COIN) to enter County Contract paid data, the COIN will automatically transfer the required data in fields A1 thru E6 after the County enters the warrant data.
6. Welfare Staff (HM only) information must be entered by the County.
7. IP, CC and HM shares of cost collected by the County must be entered by the County.

Field            A1 - COUNTY CODE - Required  
Length:         2  
Description:    County Code - Twodigit number identifying a specific county

Field            A2 - Mode - Required  
Length          2  
Description     Mode - Mode of service for the data being reported: CC for County Contract, HM for Welfare Staff-Homemaker or IP for Individual Provider. If no entry, system defaults to IP.

Field            B1 - FOR MONTH/YEAR - Required  
Length:         4  
Description:    For Month/Year - Report month/year for the data being reported.

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Field	Mode - System Generated
Description	Mode - Mode of service for the data being reported.

  

Field	Date - System Generated
Description:	Date - Month, day, and year that the data is being generated

  

Field	C1 - SI - Display
Description:	SI - Abbreviation for recipients classified as severely impaired.

  

Field	C2 - SI TOTAL CASES - Optional
Length:	7
Description:	SI Total Cases - Total CC or HM unduplicated cases for which service hours were paid during the report month. This number includes cases with payment adjustments from prior months.

  

Field	C3 - SI TOTAL HOURS - Optional
Length:	7
Description:	SI Total Hours - Total CC or HM service hours paid during the report month. This number includes hours with payment adjustments from prior months.

  

Field	C4 - SI EXPENDITURES - Optional
Length:	11
Description:	SI Expenditures - Total CC or HM expenditures during the report month, regardless of the date of service. These expenditures are minus shares of cost collected.

  

Field	D1 - NSI - Display
Description:	NSI - Abbreviation for recipients classified as non-severely impaired.

  

Field	D2 - NSI Total Cases - Optional
Length:	7
Description:	NSI Total Cases - Total CC or HM unduplicated cases for which service hours were paid during the report month.

  

Field	D3 - NSI TOTAL HOURS - Optional
Length:	7
Description:	NSI Total Hours - Total CC or HM service hours paid during the report month. This number includes hours for payment adjustments from prior months.



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Field	D4 - NSI EXPENDITURES - Optional
Length:	1
Description:	NSI Expenditures - Total CC or HM expenditures during the report month, regardless of the date of service. These expenditures are minus shares of cost collected.
Field	E1 - TOTAL - Display
Description:	Total - Sum of the data for CC or HM cases entered.
Field	E2 - TOTAL CASES - Optional
Length:	7
Description:	Total Cases - Sum of fields C2 and D2.
Field	E3 - TOTAL HOURS - Optional
Length:	7
Description:	Total Hours - Sum of fields C3 and D3.
Field	E4 - TOTAL EXPENDITURES - Optional
Length:	11
Description:	Total Expenditures - Sum of fields C4 and D4.
Field	E5 - TOTAL SOC CASES- Optional
Length:	7
Description:	Total Share of Cost Cases - Total number of IP, CC and/or HM recipients who paid shares of cost during the report month to the County or contractor(s). Shares of cost are reported by the major mode of service delivery when there is more than one. This field is to be completed by the County when the shares of cost are collected by the County for cases in the any mode.
Field	E6 - TOTAL SOC AMOUNT - Optional
Length:	11
Description:	Total SOC Amount - Total amount collected by the County from recipients as shares of cost during the report month. Share of cost amount is reported in the same manner as in field E5.

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Monthly Reporting Instructions:

All information must be entered in CSUM no later than the 10th of the month following the report month.

## County Contract (CC) Mode:

Information to be reported shall reflect only the payments made to the contractor(s) during the month of the report and the cases and hours related to these payments, regardless of when the service was performed. Counties utilizing the Contractor Interface (COIN) need not enter information into the CSUM as this is accomplished by the CMIPS. If a County collects shares-of-cost, that information must be updated through CSUM entry.

## Homemaker Mode:

Information to be reported must show the cases and IHSS hours served by County staff during the report month. The hours must reflect actual IHSS hours served (NOT staff time-study hours). To determine the expenditures to be entered for Homemaker (HM) services, multiply the IHSS hours served times the cost per hour shown in the current year's County Plan for Welfare Staff (Direct Services). The product is the HM expenditure. Supported IP information is ONLY reported in the section below and is ONLY reported quarterly.

COUNTY QUARTERLY REPORTING FOR COUNTY  
CONTRACT, WELFARE STAFF AND OTHER ACTUAL COSTS

THIS INFORMATION IS TO BE REPORTED BY THE COUNTY NO LATER THAN THE TENTH DAY OF THE SECOND MONTH FOLLOWING THE END OF THE QUARTER. For each mode, use a separate form and enter the data on a separate screen.

Field            F1- QUARTER - Required  
Length:        2  
Description:   Quarter - Indicate the fiscal year quarter for which data is being entered. Quarters are July-September=1, October-December=2, January-March=3, and April-June=4.

Field            F2 - FY - Display  
Description:   FY: Fiscal Year. (State Fiscal year is July 1 thru June 30)

Field            DATE - System Generated  
Description:   Date - Month, day and year that the data is being entered.

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Field	G1 - CONTRACT COST - Optional
Length:	9
Description:	Contract Cost - Total contract expenditures reported on the County Administrative Expense Claim (CAEC). Counties utilizing the Contractor Interface will have this field displayed with the sum of all warrants issued to the contractor in the quarter if the County has entered the warrant date timely in the "WARRANT DATE" field on the COIN screen.
Field	G2 - WELFARE STAFF - HOME MAKER COST - Optional
Length:	9
Description:	Homemaker Cost - Total Welfare Staff direct cost for homemaker services.
Field	G3 - OTHER COST - STAFF DEV - Optional
Length:	9
Description:	Other Cost-Staff Development - Total expenditures for staff development attributed to IHSS as reported on the CAEC.
Field	G4 - GRAND TOTAL - Optional
Length:	10
Description:	Grand Total - Sum of Field G1 CONTRACT COST, Field G2 WELFARE STAFF-HOME MAKER COST; Field I1 WELFARE STAFF-SUPPORTED IP COST; and Field J2 SUBTOTAL-OTHER COST.
Field	H1 - WELFARE STAFF - HOME MAKER TIME-STUDY HOURS - Optional
Length:	9
Description:	Homemaker Time-study Hours - Total time-study hours for homemaker direct services.
Field	H2 - OTHER COST - EDP - Optional
Length:	9
Description:	Other Cost-EDP (Electronic Data Processing) - Total expenditures for EDP attributed to IHSS as reported on the CAEC.
Field	I1 - WELFARE STAFF - SUPPORTED IP COST - Optional
Length:	9
Description:	Supported IP Cost - Total Welfare Staff expenditures for supported IP activities.
Field	I2 - OTHER COST - OTHER - Optional
Length:	9
Description:	Other Cost-Other - Total of Other expenditures claimed on the CAEC.

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Field	J1 - WELFARE STAFF-SUPPORTED IP TIME-STUDY HOURS - Optional
Length:	7
Description:	Supported IP Time-study Hours - Total time-study hours for supported IP activities.
Field	J2 - OTHER COST - SUBTOTAL - Optional
Length:	9
Description:	Other Cost-Subtotal - Sum of Field G3 STAFF DEVELOPMENT, Field H2 EDP, and Field I2 OTHER.

#### Quarterly Reporting Instructions:

1. All information is obtained from the quarterly County Administrative Expense Claim. It must be reported no later than the 10th of the second month following the end of the State Fiscal Year quarter (Nov. 10; Feb. 10; May 10; and Aug 10). Late or erroneous information results in faulty management information for the County and State program and financial reports.

2. Counties utilizing the Contractor Interface need not enter information in field G1 if no payments were made to the contractor(s) and no additional claims are made for reimbursement for the IHSS contract.

Fields	K1, K2, K3 - PREPARED BY, DATE PREPARED, REMARKS - Optional
Description:	County use fields for person(s) preparing information for entry into the CMIPS.

Fields	L1, L2, L3 - ENTERED BY, DATE ENTERED, REMARKS - Optional
Description:	County use fields for person(s) entering information into the CMIPS.

#### ALLOCATION AND YEAR-TO-DATE COST (CSUM DISPLAY ONLY)

TOTAL ALLOCATION:	Total allocation, workers' comp, CMIPS contracts and all supplemental adjustments made during the fiscal year.
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CONTRACT COST:	Total fiscal year-to-date expenditures for the Contract mode, minus shares of cost. This data is obtained from the information entered by the County on the monthly and quarterly sections of the screen and is updated monthly or transferred to the CSUM by Contractor Interface (COIN) screen entries.
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WELFARE STAFF  
COST:

Total fiscal year-to-date expenditures for Welfare Staff-Homemaker (HM) services and Supported IP (SIP) activities, minus shares of cost. This data is obtained from the information entered by the County on the monthly (HM) and quarterly (SIP) sections of the screen and is updated monthly.

IP COST:

Total fiscal year-to-date expenditures for the Individual Provider mode. The total is computed by adding the gross provider wages, employer taxes and restaurant meal allowances, minus shares of cost. This field is derived from the CMIPS data base and is updated whenever CMIPS reports are generated during the month.

TOTAL  
EMPLOYER TAXES:

Total fiscal year-to-date FICA, SUI and FUTA employer contributions in the IP mode. This is a display only field of the taxes already calculated as part of the IP Cost above.

WORKERS' COMP  
COST:

Total fiscal year-to-date pro rata share of workers' compensation cost. This field is deducted from the total allocation at the beginning of the FY.

CMIPS CONTRACTS  
COST:

Total fiscal year-to-date pro rata share of CMIPS contracts cost. This field is deducted from the total allocation at the beginning of the FY.

OTHER COST:

Total fiscal year-to-date Other expenditures submitted quarterly on the County Administrative Expense Claim (CAEC). This is the sum of EDP (Electronic Data Processing), Staff Development and Other expenditures attributed to the Program.

TOTAL YEAR-TO-DATE  
COST:

Total fiscal year-to-date expenditures for IP (Individual Provider), which includes employer taxes; CC (County Contract); and WS (Welfare Staff), which includes Homemaker (HM) services and Supported IP (SIP) activities, Workers' Compensation, CMIPS contracts and Other Costs.

BALANCE REMAINING:      Balance of the current allocation after expenditures year-to-date, including total Worker's Compensation and CMIPS contracts, have been deducted.

COUNTY PLAN (CSUM DISPLAY ONLY)

This information is entered by the State Department of Social Services staff after the approval of each County's County Plan. It reflects the total caseload projections for the current year in paid cases, paid hours and authorized cases; the projected current year totals of paid cases, hours per case and cost per hour for each mode; the projected current year total Supported IP staff time-study hours and cost per time-study hour; the projected expenditures for Other Cost (EDP, Staff Development and Other). Changes in these fields will be made by State staff when an amended County Plan is approved.

## ACCESSING THE COUNTY SUMMARY (CSUM) SCREEN

To access the County Summary (CSUM) Screen you may need to use the password assigned for this screen only. If the password is the same as your other screens, you will need only to enter the following information on the "NEXT" line:

CSUM County Summary Screen

MODE Code used as required for A=Add, C=Change or I=Inquiry.

COUNTY CODE;

SERVICE The two-digit County code and the service mode (IP, CC, HM).

MODE

EXAMPLE:

THIS CSUM I 59CC

NEXT CSUM I 59HM enter

If the password used is different, you first need to access the MENU screen.

EXAMPLE:

THIS MENU I

NEXT CSUM I 59CC enter

You will now have access to the County Summary (CSUM) Screen.

```

THIS CSUM C 59CC
NEXT CSUM C 59HM
FOR MONTH: 12 / 91      MONTHLY REPORTING      MODE: CC      DATE: 01/09/92
                        TOTAL CASES      TOTAL HOURS      EXPENDITURES      SOC CASES      SOC AMOUNT
SI                      9                778                7,462
NSI                     368               8,975               85,408
TOTAL                   377               9,753               92,871                33          2,218
QUARTER: 2 FY: 91 / 92      QUARTERLY REPORTING      DATE: 02/04/92
CONTRACT COST              WELFARE STAFF      OTHER COST      GRAND TOTAL
285,613      HM COST              0      STAFF DEV      253          364,688
              HM T/S HRS              0      EDP              0
              SUP IP CST              78,822      OTHER              0
              SUP IP T/S HRS              1,896      SUBTOTAL              253
ALLOCATION AND YEAR-TO-DATE COST:
TOT ALLOC      2,849,630      TOT EMP TX              5,940      OTHER              513
CC COST      563,638      WK CMP CST              197,003      TOT YTD CST      1,148,922
WF STF CST      154,722      CMIPS COST              97,591      BALANCE
IP COST      135,455
COUNTY PLAN:
TOT CASELOAD-PD CS:      6,910      PD HR:      347,406      ATH CS:      7,052
IP MODE-      PD CS:      2,211      HR/CS:      99.5      CST/HR:      4.52
CC MODE-      PD CS:      4,699      HR/CS:      27.1      CST/HR:      9.45
HM SERVICES- PD CS:      0      HR/CS:      .0      CST/HR:      .00
SUP IP SERV- T/S HRS:      7,584      CST/HR:      41.57      OTHER COST:      1,000

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